



*NW8 Adult LOCAL ADVISORY COUNCIL
Application for Board Appointment*

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Home Phone: _____ Cell Phone: _____

E-mail: _____ Alternate Contact (Name/Number): _____

County of Residence: _____

How long have you lived in the NW 8 Counties: _____

Occupation (If applicable): _____

Employer (If applicable): _____

Employers Address (If applicable): _____

Board position interested in: _____ Chairperson _____ Vice-Chairperson _____ Secretary

Please state briefly why you are interested in serving on the Committee/Board for the Local Advisory Council:

Do you have any special interests, education or training which you feel the Local Advisory Council could use?

Conflict of interest is defined as the participation in any activity, recommended action, or decision from which the individual has or could have the potential to receive personal gain, whether it be direct or indirect. In accordance with this definition, do you have any legal or equitable interest in any business, however organized, which could be construed as a conflict of interest? Yes _____ No _____

If Yes, please provide details:

Are you currently serving on any other Northwest 8 County Advisory Committee(s)/Board(s)?
Yes _____ No _____ If so, name of the Committee/Board:

Are you related to any Northwest 8 County Commissioners or to any member on the Local Advisory Committee/Board? Yes _____ No _____ If so, give name and relationship:

Other qualifications, experience, information or comments you would like to submit.

PERSONS WITH DISABILITES ARE ENCOURAGED TO APPLY

RETURN THIS COMPLETED APPLICATION FORM TO YOUR COUNTY OF RESIDENCE

ATTENTION: NW8 REGION ONE ADULT LOCAL ADVISORY COUNCIL

Kittson County Social Services	410 South 5 th Street S.	Hallock, Minnesota	56738
Mahnomen County Social Services,	311 North Main Street, PO Box 460	Mahnomen, Minnesota	56557
Marshall County Social Services	208 East Colvin Avenue	Warren, Minnesota	56762
Norman County Social Services	15 2 nd Avenue NE	Ada, Minnesota	56510
Pennington County Dept. of Welfare & HS	318 Knight Avenue, PO Box 340	Thief River Falls, Minnesota	56701-0340
Polk County Social Services	612 North Broadway, Suite 302	Crookston, Minnesota	56716
Red Lake County Social Services	125 Edward Avenue SW	Red Lake Falls, Minnesota	56750
Roseau County Social Service Center	208 6th Street SW	Roseau, Minnesota	56751-1451

Signature

Date

Completed by Office Personnel:

Received Date: _____ Reviewed By: _____
Sent to Council: _____ Sent to Board: _____

This application will be kept on file for 12 months or the length of appointment.

Board Position: _____ Approved _____ Denied _____

Explanation if Denied:

Board Approval/Denial Signature

Date

Application Expiration: _____